## DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name, that I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention, design or discovery entitled SYSTEM AND METHOD FOR ESTIMATING THE FEASIBILITY OF OUTSOURCING INFORMATION TECHNOLOGY SERVICES, the specification of which (check one):

| X_1S                    | attached hereto; or       | •                         |                                |
|-------------------------|---------------------------|---------------------------|--------------------------------|
| w                       | as filed on               | , as Application Ser      | ial No                         |
| and wa                  | s amended on              | (if applicable);          |                                |
| that I have reviewed    | and understand the        | contents of the abo       | ve-identified specification,   |
| including the claims    | , as amended by a         | ny amendment referi       | ed to above; and that l        |
| acknowledge the duty    | to disclose to the U      | S. Patent and Traden      | nark Office all information    |
| known to me to be ma    | terial to patentability a | as defined in 37 C.F.R.   | § 1.56.                        |
| I hereby clain          | n the benefit under       | Title 35, United State    | es Code, § 119(e) of any       |
| United States provisio  | nal application(s) liste  | ed below:                 |                                |
| Serial No.              |                           | <u>Date</u>               |                                |
|                         |                           | NONE                      |                                |
|                         |                           |                           | C. § 119 of any foreign        |
| application(s) for pate | nt or inventor's certifi  | icate listed below and    | have also identified below     |
| any foreign application | n(s) for patent or inver  | ntor's certificate having | g a filing date before that of |
| the application on whi  | ch priority is claimed:   |                           |                                |
|                         |                           | Date                      | Priority                       |
| Number                  | Country                   | Filed                     | Claimed                        |
|                         |                           | NONTE                     | (Yes) (No)                     |
|                         |                           | NONE                      |                                |

I hereby claim the benefit under 35 U.S.C. § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application(s) in the manner provided by the first paragraph of 35 U.S.C. § 112, I acknowledge the duty to disclose to the U.S. Patent and Trademark Office all information known to me to be material to patentability as defined in 37 C.F.R. § 1.56 which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application:

## ATTORNEY DOCKET NO.: 014208.1641 (50-03-027)

## DECLARATION AND POWER OF ATTORNEY

2

| Application<br>Serial Number   | Date Filed | Status |
|--------------------------------|------------|--------|
|                                | NONE       |        |
| I hereby appoint:              |            |        |
| Practitioners at Customer No.: | 35005      |        |

all of the firm of Baker Botts L.L.P. and Electronic Data Systems Corporation, my attorneys with full power of substitution and revocation, to prosecute this application and to transact all business in the United States Patent and Trademark Office connected therewith, and to file and prosecute any international patent applications filed thereon before any international authorities.

Send Correspondence To:

Direct Telephone Calls To:

The above-mentioned Customer Number

David G. Wille at 214.953.6595

Atty. Docket No. 014208.1641

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

| Full Name of Single Inventor Inventor's signature | James T. Chapman J-7. Com-               |  |
|---|--|--|
| Date  | DEZ 11, Zeroz                            |  |
| Residence (City, County, State)                   | Portland, Washington County, OR          |  |
| Citizenship                                       | United States of America                 |  |
| Post Office Address                               | 1729 NW Christine Ct. Portland, OR 97299 |  |

ATTORNEY DOCKET NO.: 014208.1641 (50-03-027)

**DECLARATION AND** POWER OF ATTORNEY

3

Full Name of Single Inventor Inventor's signature

Date

Residence (City, County, State)

Citizenship

Post Office Address

Paul A. Below

- Gard G Below - Dec 11, 2003

Poulsbo, Kitsap County, WA

United States of America

2500 NF. Plunkett Lane Poulsbo, WA 98370

## ATTORNEY DOCKET NO.: 014208.1641 (50-03 027)

DECLARATION AND POWER OF ATTORNEY

4

Full Name of Single Inventor Inventor's signature

Date

Residence (City, County, State)

Citizenship

Post Office Address

12/11/2003

Littleton, Jefferson County, CO

United States of America

5715 South Depew Circle Littleton, CO 80123

ATTORNEY DOCKET NO.: 014208.1641 (50-03-027)

DECLARATION AND POWER OF ATTORNEY

5

Full Name of Single Inventor Inventor's signature

Date

Residence (City, County, State)

Citizenship

Post Office Address

Olga (nmi) Makar-Limanov *Oiga Makar - Limanov* 

12/11/2003

West Bloomfield, Oakland County, MI

United States of America

4870 Arrowhead Road West Bloomfield, MI 48323